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26474 7590 12/16/2003

KEIL & WEINKAUF  
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Mary Chadwick	(Depositor's name)
<i>Mary Chadwick</i>	(Signature)
3/16/04	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/831,397	05/09/2001	Jorg Rosenberg	0480001200	3085

TITLE OF INVENTION: METHOD OF PRODUCING SOLID DOSAGE FORMS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	03/16/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
THEISEN, MARY LYNN F	1732	264-141000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Abbott GmbH &amp; Co. KG

Germany

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☒ Advance Order - # of Copies 10

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☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 11-0345 (enclose an extra copy of this form).

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(Authorized Signature)

(Date)

H.B. Keil, Reg. No. 18,967

3/16/04

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03/18/2004 BSAYAS12 00000067 09831397

01 FC:1501

02 FC:8001

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